

PART I

TO BE ANSWERED IMMEDIATELY AFTER YOU HAVE FINISHED SMOKING ALL
OF CIGARETTE "K2", AND BEFORE YOU START SMOKING CIGARETTE "E2".

1. Now that you have tried test cigarette "K-2", we would like you to tell us how you think it compares with other cigarettes you have tried.

Please use the scoreboard below - here is how it is done:

If the test cigarettes are not as good as other cigarettes you have tried, put an "X" in one of the boxes on the left-hand side of the scoreboard.

If they are about average, put an "X" in a box near the middle.

If they are better than other cigarettes you have tried, put the "X" in one of the boxes on the right-hand side of the scoreboard.

How near to the end you put your "X" shows how much poorer or how much better you think the test cigarettes are. Use the last box on the left or right only if these are the very poorest or the very best cigarettes you have ever tried.

OPINION SCOREBOARD

POOREST

BEST

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2. What, if anything, did you dislike about cigarette "K-2"? _____

3. What, if anything, did you like about cigarette "K-2"? _____

- 4a. How many test cigarettes "K-2" did you smoke? _____
(Please be as exact as you can)

- b. If you smoked less than all the test cigarettes "K-2", please tell why _____

- 5a. Is test cigarette "K-2" like any brand
of cigarette you have smoked before?

Yes ☐

No ☐

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- b. (If "yes") What brand is it like? _____

NOTE: Now that you have told us about cigarette "K-2", start smoking cigarette "E-2". Even if you haven't smoked all the "K-2" cigarettes, please do not smoke any of them while you are smoking cigarette "E-2". The questions on the next page are not to be answered until you have finished smoking all of cigarette "E-2".

PART II

TO BE ANSWERED IMMEDIATELY AFTER YOU HAVE FINISHED SMOKING ALL OF CIGARETTE "E-2".

1. Now that you have tried test cigarette "E2", we would like you to tell us how you think it compares with other cigarettes you have tried.

Please use the scoreboard below - here is how it is done:

If the test cigarettes are not as good as other cigarettes you have tried, put an "X" in one of the boxes on the left-hand side of the scoreboard.

If they are about average, put the "X" in a box near the middle.

If they are better than other cigarettes you have tried, put the "X" in one of the boxes on the right-hand side of the scoreboard.

How near to the end you put your "X" shows how much poorer or how much better you think the test cigarettes are. Use the last box on the left or right only if these are the very poorest or the very best cigarettes you have ever tried.

OPINION SCOREBOARD

POOREST

BEST

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2. What, if anything, did you dislike about cigarette "E-2"? _____

3. What, if anything, did you like about cigarette "E-2"? _____

- 4a. How many test cigarettes "E-2" did you smoke? _____
(Please be as exact as you can)

- b. If you smoked less than all the test cigarettes "E-2", please tell why _____

- 5a. Is test cigarette "E2" like any brand of cigarette you have smoked before?

Yes ☐

No ☐

- b. (If "yes") What brand is it like? _____

PLEASE ANSWER QUESTIONS IN PART III

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PART III - TO BE COMPLETED AFTER YOU HAVE ANSWERED PART II

1a. Now all things considered, which of the two cigarettes you tested did you prefer?

Preferred "K-2" ☐

Preferred "E-2" ☐

No Preference ☐

b. If you preferred one cigarette to the other, please tell us why: _____

2. Which test cigarette did you think: (Check one of the boxes for each quality listed)

	<u>"K-2"</u>	<u>"E-2"</u>	<u>No Preference</u>
Had the better flavor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Left the better after taste (after smoking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had the better aroma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was smoother.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was cooler.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was easier to draw on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was more satisfying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had the better strength	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IN THE FOLLOWING, PLEASE ANSWER THE QUESTIONS IN BOTH COLUMNS.

3a. Did you think cigarette "K-2" was:

Too mild ☐
Too strong ☐
About right ☐

3b. Did you think cigarette "E-2" was:

Too mild ☐
Too strong ☐
About right ☐

4a. Did you think cigarette "K-2" was:

Too sweet ☐
Not sweet enough ☐
About right ☐

4b. Did you think cigarette "E-2" was:

Too sweet ☐
Not sweet enough ☐
About right ☐

5a. Did you think cigarette "K-2" burned:

Too slowly ☐
Too rapidly ☐
About right ☐

5b. Did you think cigarette "E-2" burned:

Too slowly ☐
Too rapidly ☐
About right ☐

6. How many cigarettes (not packs)
do you usually smoke in one day? _____

(Be sure to answer questions on next page)

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7a. What one brand of cigarettes do you now smoke most often? _____

b. Is this regular size? ☐ or King size? ☐ Long size? ☐

c. Does it have a filter tip? Yes ☐ No ☐

8a. Do you now smoke any other brands
of cigarettes with some frequency? Yes ☐ No ☐

(If "No", skip to Question #9)

b. What one other brand do you smoke with some frequency? _____

c. Is this regular size? ☐ or King size ☐

d. Does it have a filter tip? Yes ☐ No ☐

9. Please indicate your age and sex:

Age: 18-20 ☐ 21-24 ☐ 25-34 ☐ 35-49 ☐ 50 and over ☐

Sex: Male ☐ Female ☐

Tester's Name _____

Town or City _____ State _____

Thanks again for your cooperation.

EIIMO ROPER and ASSOCIATES
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